

DMC
Children's Hospital
of Michigan

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Poison Control Center

Hutzel Building
4707 St. Antoine
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I am writing to fully support Senate Bill no. 1082. As the Director of the Children's Hospital of Michigan Regional Poison Center, the alarming trend of increased hospital visits related to synthetic marijuana products continue. As of today, there have been 166 hospital visits reported to the poison center, compared with 159 in all of 2011. The most concerning fact is that 50% of our cases are in teenagers, aged 13 to 18 years. I have summarized a few of the most dramatic cases.

Case 1: A 21 year old previously healthy male presented to the hospital on 10/7/11 with difficulty speaking and headache which occurred after he returned home from smoking a product called "Super Kush". He was diagnosed with an ischemic stroke. Complications included low blood pressure resulting in kidney injury. He required outpatient therapy to improve speech, language, and coordination. The product was analyzed, and contained three different synthetic cannabinoids (Am-2233, JWH 210, AM 2201).

Case 2: A 14 year old previously healthy female smoked a synthetic marijuana product on 2/14/12 and had a seizure at home one hour later. She was treated with anticonvulsants and recovered.

Case 3: A 14 year old previously healthy female was brought to the emergency department on 2/9/12 for bizarre behavior, hallucinations, and fast heart rate after use of a synthetic cannabinoid brand that was a new product for her. She previously smoked K2, and tried "knockout" for the first time. She was discharged after a two day stay, requiring multiple doses of sedatives to resolve symptoms.

Case 4: A 20 year old male smoked a synthetic marijuana product on 1/21/12 and immediately lost consciousness, fell down, and sustained face lacerations. He woke up screaming. He was discharged the next day.

Case 5: An 18 year old male presented to the hospital 12/21/11 in full cardiac arrest after smoking a synthetic cannabinoid "Mr Nice Guy" with friends. According to the hospital, he "freaked out" after smoking, friends put him in the shower, and he collapsed. However, he also had a recent gunshot wound, which later police reports attributed to one of these friends. The preliminary autopsy report concludes death by gunshot wound.



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Case 6: A 22 year old man smoked daily a variety of synthetic cannabinoid products from April 2011 to March 2012. He presented with headache, tremors, palpitations, wheezing, and sweating, with depression every time he discontinues use.

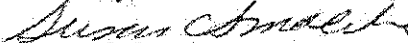
Case 7 and 8: Two patients, aged 18 years old, smoked an herbal blend called "Loud Fruit Loops" and both immediately felt dysphoric and incapable of any voluntary movement. They responded to questions, but could not move. Symptoms resolved, with the female improving more slowly than the male, and they were discharged the next day.

Case 9: A 17 year old male presented to the hospital on 4/6/12 with an acute dystonic reaction "torticollis" (neck stiff and fixed to one side), and tremors after smoking a synthetic cannabinoid product. This resolved with the usual treatment for this drug-induced disorder.

Case 10: A 42 year old female with history of chronic abuse of "spice" presented on 3/28/12 with uncontrollable seizures "status epilepticus". She developed a permanent condition known as toxic leucoencephalopathy. This is a structural change in the white matter of the brain, usually irreversible. She was discharged to a nursing home.

The continued rise in calls to the poison center, with serious consequences, is compelling reason to enact SB 1082. I believe strongly that the method used to add chemical classes, rather than individual agents, is the best approach to curb the availability of these products and to protect the citizens of Michigan.

Sincerely,


Susan C Smolinske, PharmD, DABAT

Director, Children's Hospital of Michigan Regional Poison Control Center